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APPLICATION NUMBER

FILING/RECEIPT DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NUMBER

09/900,522

07/06/2001

Robert M. Bond

7784-000260

JAN 09 2002



CONFIRMATION NO. 3994

FORMALITIES LETTER



OC00000006501394

27572

 HARNESS, DICKEY & PIERCE, PLC
 P.O. BOX 828
 BLOOMFIELD HILLS, MI 48303

Date Mailed: 08/31/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

01/15/2002 NROCHA1 00000021 080750 09900522

FILED UNDER 37 CFR 1.53(b)

 01 FC-101 740.00 CH
 02 FC-103 18.00 CH
 03 FC-105 130.00 CH

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

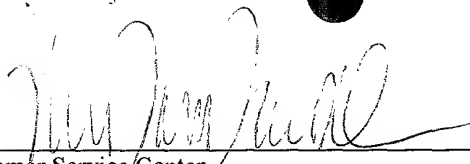
- The statutory basic filing fee is missing.
Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- Total additional claim fee(s) for this application is \$18.
 - \$18 for 1 total claims over 20.
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 858.**

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

*A copy of this notice **MUST** be returned with the reply.*



A handwritten signature in cursive script, likely of a representative from the Customer Service Center, is written over a horizontal line.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY

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Please type a plus sign (+) inside this box → ☐

HDP/SB/21 based on PTO/SB/21 (08-00)

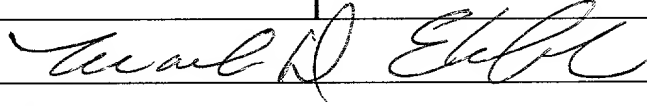
TRANSMITTAL FORM
 (to be used for all correspondence after initial filing)

OTPE
 JAN 09 2002
 PATENT & TRADEMARK OFFICE


Application Number	09/900,522
Filing Date	7/6/01
First Named Inventor	Bond et al
Group Art Unit	not assigned
Examiner Name	not assigned
Attorney Docket Number	7784-000260

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	Mark D. Elchuk	Reg. No.	33,686
Signature					
Date	October 30, 2001				

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.			
Typed or printed name	Mark D. Elchuk		
Signature		Date	October 30, 2001

09/900,522-010902